

City of Milwaukee Health Department Childhood Lead Poisoning Prevention Program

This is an invitation to receive free funding for lead abatement.

Please fill out the form below and return it to:

City of Milwaukee Health Department, Childhood Lead Poisoning Prevention Program

Attn: Richard Gaeta

841 N Broadway, Room 118, Milwaukee, WI 53202

Phone: (414) 286-0387 or (414) 286-5788 Fax: (414) 286-0715

Property Address: _____

Owner Name: _____ Phone Number: _____

Owner Address: _____ City/State: _____ ZIP: _____

Please list all rental properties you own in the City of Milwaukee below (or attach list):

ADDRESS	No. of UNITS	VACANT (yes/no)	TAX Status (Current/Delinquent)

As an agency in receipt of grant funding, the Health Department must comply with federal regulations in obtaining verification of the applicant's ethnicity. Please provide the following information:

- ☐ Black, non Hispanic ☐ White, non Hispanic ☐ Hispanic ☐ Asian/Pacific Islander
☐ American Indian/Alaskan Native

Do you or your tenants need either of the following services:

- ☐ Interpreter ☐ Special Accommodations

How did you hear about our program?

- ☐ Word of Mouth ☐ Mailing ☐ Referral Agency _____ (name of agency)
☐ Other (please explain) _____

Disclaimer: I agree to complete the Owner's Scope of Work on the grant-funded unit within 60 days of receipt. If this property has orders for lead abatement, I agree to complete ordered work within 30 days so that I may remain eligible for the grant funding. **I agree to pay a \$57 permit fee, for the project address, directly to the selected contractor upon notification of start date.**

Owner's Signature _____

Date: _____

(Please read and sign the reverse side of this application)

The City of Milwaukee Health Department in its capacity as an employer and service provider does not discriminate on the basis of age, race, religion, color, gender, national origin, arrest or conviction record, sexual orientation, marital status, disability, political belief or affiliation, or military participation. Persons needing disability assistance information, language assistance, or interpreter services please call 414-286-3524 or (TTY) 414-286-2025. Discrimination claims may be filed with the Department's Equal Opportunity Coordinator by calling 414-286-2359.

Think Health Act Now!
CITY OF
MILWAUKEE HEALTH DEPARTMENT
Serving Milwaukee Since 1867
Tom Barrett, Mayor
Bevan K. Baker, Commissioner of Health
www.milwaukee.gov/health

Requirements for Property Owners

I understand that as the owner of said property **I will not permit any illegal or abusive** activities to occur on the premises – including but not limited to the following: The presence of illegal drugs, brandishing weapons, or threats against program staff or contractors. I also understand that **failure to comply will result in immediate cancellation from the program.**

Storm Windows

Storm windows are the owner's responsibility. All storm windows must be present and **tight fitting** prior to a certified contractor performing package window treatments. It is the owner's responsibility to contact the assigned inspector regarding his/her choice for handling missing storm windows: whether the owner decides to install the missing storm windows him/herself, or pay a contractor to install them.

Owner's Scope

Work must be completed with lead safe work methods as agreed on Owner's Inspection Report & Scope of Work. If painted surfaces were repaired you must wet mop your work area and dust samples will be taken to assure safety. If the owner's scope is not completed within 60 days the application will be voided (excluding exterior scopes written during the winter months which will be due May 31st 2006).

Vacant Units

If the property is vacant: heat, electricity and water must be turned on 24 hours in advance of the contractor's starting date. All floors must be cleared of debris and wet mopped.

Sash Replacements

The Health Department will pay for the first three sashes per unit written on the scope of work. The Owner will pay for any sash over three written on the scope, as well as any sash not written on the scope. Stairwells must be clear of debris and wet mopped before window work will begin. If rehab work was done, dust wipe samples will be taken to assure safety.

You must provide your tenant with 24 hour notice prior to entry

It is the owner's responsibility to make sure the rental unit is accessible to the contractor by providing entry each day with his/her presence or a key for the duration of the job. If entrance is not granted, no further attempts will be made to perform the package window treatments in that particular unit and the contractor may require a trip fee.

You must advise your tenants to prep the windows prior to the contractor performing lead abatement work. This includes removing any window coverings such as draperies, blinds or shades, and moving any furniture that may be blocking a path to the windows. If your tenant is unable to perform this function, you must perform it.

For the health and safety of the children, tenants must be advised to keep small children away from the lead abatement unit while certified contractors are performing work. The lead abatement work will be stopped if children are present at the project address.

The owner is responsible for the cost of any change orders not written on the scope of work. The owner shall pay the cost of any change orders directly to the contractor.

MHD will provide you inspection and clearance results upon completion of the project.

Verification

"I have read and understand my responsibilities as a property owner applying for lead abatement grant funds."

Owner's Signature _____

Date: _____

(Please complete and sign the reverse side of this application)